

# AHCCCS ON-LINE CLAIM SUBMISSION MANUAL

## Section 4.a:

### **Professional (1500)**



# Arizona Health Care Cost Containment System

## Claim Submission



### Enter New Claim

Type of Claim:

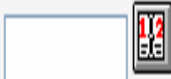
Professional ▼

Go...

In this example  
Professional (CMS  
1500) was chosen

### View Status

Date of Submission:




Go...

Once you have  
made your  
choice, click on  
the Go button


AHCCCS Online - Microsoft Internet Explorer provided by AHCCCS

File Edit View Favorites Tools Help

Address <https://azwebstst.statemedicaid.us/ClaimSubmission/Professional-1.asp> Go Links »



# Arizona Health Care Cost Containment System



:: Main Menu :: FAQ :: LogOut ::

## Main Menu

- Eligibility and Enrollment Status
- Provider Information
- Claim Status
- Electronic Remittance Advice
- Prior Authorization Inquiry
- Newborn Notification
- Claim Submission**
- Provider Verification

## Account Information

- User Name: axescobedo
- User ID: 0000020
- Type: Individual
- IP: 170.68.241.113
- AHCCCS Provider ID: 436198
- User Account


## Professional Claim Information

Note: As of March 1, 2008, the NPI ID number will be required if applicable

Service Provider			
Provider ID	National Provider ID (NPI)	Location	Name
123456			Find...

Here you will enter your AHCCCS Service Provider ID

Then click the **Find Button**



Privacy Policy | Contact AHCCCS

AHCCCS, 801 E. Jefferson, Phoenix, AZ 85034, (602) 417-4000

Copyright 2003 AHCCCS, All Rights Reserved

Done Internet

start | Inbox - Microsof... | SESSION1 - EXT... | SESSION2 - EXT... | 052458 denied d... | AHCCCS Online - ... | Document1 - Mic... | 9:50 AM

AHCCCS Online - Microsoft Internet Explorer provided by AHCCCS

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Print Mail Address Bar

Address: https://azwebtst.statemedicaid.us/ClaimSubmission/Professional-1.asp

**Arizona Health Care Cost Containment System**

ARIZONA @YOUR SERVICE

Main Menu :: FAQ :: LogOut ::

**Professional Claim Information** [Help](#)

**Main Menu**

- Eligibility and Enrollment Status
- Provider Information
- Claim Status
- Electronic Remittance Advice
- Prior Authorization Inquiry
- Newborn Notification
- Claim Submission**
- Provider Verification

**Account Information**

- User Name: avescobedo
- User ID: 0000020
- Type: Individual
- IP: 170.68.241.113
- AHCCCS Provider ID: 436198
- User Account

**Service Provider**

Provider ID	National Provider ID (NPI)	Location	Name	Type
123456		01	<input type="button" value="Find..."/> Doe/Jane A.	PSYCHOLOGIST

**Recipient**

AHCCCS ID	Name	Date of Birth	Gender
A12345678	<input type="button" value="Find..."/>		

Enter the Member's AHCCCS ID number

Then click the **Find Button**

**CONFIRMED**  
SECURE WEB SITE  
Arizona Health Care Cost Containment System  
HIGH ASSURANCE SSL  
MAY 31 2007 9:52:25

Privacy Policy | Contact AHCCCS

AHCCCS, 801 E. Jefferson, Phoenix, AZ 85034, (602) 417-4000

Copyright 2003 AHCCCS, All Rights Reserved

Done Internet

start Inbox - Microsof... SESSION1 - EXT... SESSION2 - EXT... 052458 denied d... AHCCCS Online - ... Document1 - Mic... 9:52 AM

AHCCCS Online - Microsoft Internet Explorer provided by AHCCCS

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Print Mail

Address: https://azwebtst.statemedicaid.us/ClaimSubmission/Professional-1.asp Go

Links: AHCCCS - Public Website AHCCCS Public Website Arizona Government University Customize Links Free Hotmail

# AHCCCS Arizona Health Care Cost Containment System

ARIZONA @ YOUR SERVICE

Main Menu :: FAQ :: LogOut ::

## Main Menu

- Eligibility and Enrollment Status
- Provider Information
- Claim Status
- Electronic Remittance Advice
- Prior Authorization Inquiry
- Newborn Notification
- Claim Submission**
- Provider Verification

## Professional Claim Information

Service Provider

Provider ID	National Provider ID (NPI)	Location	Name	Type
123456		01 Find...	Doe./Jane A	Psychologist

Recipient

AHCCCS ID	Name	Date of Birth	Gender
A12345678 Find...	Smith, Jane	07/08/1992	F

Is Patient's Condition Related To:

Submission Reason	Original Reference Number	Employment?	Auto Accident?	Other Accident?
Original		<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No

Date of Current Illness/Injury/Pregnancy: Hospitalization Dates Related to Current Services

Prior Authorization Number	Patient's Account Number	From	To
	123456789		

Referring Provider

Provider ID	National Provider ID (NPI)

Billing Provider

Tax ID	National Provider ID (NPI)	Provider ID
599999999	1234567890	654321

< Previous Next >

Privacy Policy | Contact AHCCCS

CONFIRMED SECURE WEB SITE  
CLICK TO VERIFY FEB 7 2008 15:26:51

**NOTE:**

There are built-in edits that won't allow claim entry to continue until required fields are completed. If a required field is bland, an edit message will appear asking for the information. When the edit message is clicked, the cursor will go to the field that requires the information

Enter the Patient's account #

Enter the AHCCCS Billing or the Group Provider ID here

Enter the Billing or the Group Provider Tax ID here

Enter the Billing or the Group NPI-ID here

Then click the Find Button.

AHCCCS Online - Microsoft Internet Explorer provided by AHCCCS

File Edit View Favorites Tools Help

Back

Forward

Stop

Home

Search

Favorites

Print

Mail

Internet

Address: https://azwebtst.statemedicaid.us/ClaimSubmission/Professional-2.asp

Go Links

AHCCCS

Arizona Health Care Cost Containment System

ARIZONA @YOUR SERVICE

Main Menu :: FAQ :: LogOut ::

Main Menu

Eligibility and Enrollment Status

Provider Information

Claim Status

Electronic Remittance Advice

Prior Authorization Inquiry

Newborn Notification

Account Information

User Name: awescobedo

User ID: 0000020

Type: Individual

IP: 170.68.241.113

AHCCCS Provider ID: 436198

User Account

Professional Claim Information

Enter the Diagnosis here without the period. Up to four diagnoses can be entered

Diagnosis or Nature of Illness or Injury (Relate Items 1, 2, 3 or 4 by line to the Diagnosis Code pointer)

Diagnosis Code 1

Diagnosis Code 2

Diagnosis Code 3

Diagnosis Code 4

1234

Enter the From and To Date of Service here

Service Lines

Enter the Place of Service here. Click on the down arrow to get a list of valid Place of Service

Click the corresponding diagnosis pointer box

Dates of Service		Place of Service	HCPCS	Modifier Code		Diagnosis Code Pointer				Days/Units	
From (MM/DD/YYYY)	To (MM/DD/YYYY)			1	2	NDC	1	2	3		4
1	01/01/07	01	99201				<input checked="" type="checkbox"/>				1
2											
3											

Enter the HCPCS/CPT codes here

Enter the Days or Units

Enter the billed amount here

Line Charges	Paid	Deductible	Coinsurance	Other Insurance	Emergency	EPSDT Indicator	Delete
1 \$30	\$	\$	\$	\$	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="checkbox"/>
2 \$	\$	\$	\$	\$	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="checkbox"/>
3 \$	\$	\$	\$	\$	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="checkbox"/>

CLICK TO VERIFY MAY 31 2007 10:03:57

Add More Service Lines...

< Previous

Submit

Click Submit button when done

Privacy Policy | Contact AHCCCS

AHCCCS, 801 E. Jefferson, Phoenix, AZ 85034, (602) 417-4000

Copyright 2003 AHCCCS, All Rights Reserved


Page 27

AHCCCS Online - Microsoft Internet Explorer provided by AHCCCS

File Edit View Favorites Tools Help

Back Forward Stop Home Search Favorites Refresh Mail Print Write Send To

Address <https://azwebtst.statemedicaid.us/ClaimSubmission/Confirmation.asp> Go Links



# Arizona Health Care Cost Containment System



:: Main Menu :: FAQ :: LogOut ::

## Main Menu

- Eligibility and Enrollment Status
- Provider Information
- Claim Status
- Electronic Remittance Advice
- Prior Authorization Inquiry
- Newborn Notification
- Claim Submission**
- Provider Verification

## Account Information

User Name:	awescobedo
User ID:	0000020
Type:	Individual
IP:	170.68.241.113
AHCCCS Provider ID:	436198
User Account	

## Claim Entry Confirmation


Transmission Status: Successful  
Claim Type: Professional  
Patient Account Number: 123456789

[View Claim](#) [Enter New Claim](#)

**Click on**

**View Claim**

**This will let you view what was entered and allow changes/corrections to the claim**



medicaid.us - Arizona

CLICK TO VERIFY MAY 31 2007 10:06/BS

Privacy Policy | Contact AHCCCS

AHCCCS, 801 E. Jefferson, Phoenix, AZ 85034, (602) 417-4000

Copyright 2003 AHCCCS, All Rights Reserved

Done Internet

start Inbox - Microsof... SESSION1 - EXT... SESSION2 - EXT... 052458 denied cl... AHCCCS Online - ... Document1 - Mic... 10:06 AM

https://azwebtst.statemedicaid.us/ClaimSubmission/Professional-Summary.asp - Microsoft Internet Explorer provided by AHCCCS

File Edit View Favorites Tools Help

Back Search Favorites

Address https://azwebtst.statemedicaid.us/ClaimSubmission/Professional-Summary.asp Go Links

### Arizona Health Care Cost Containment System Professional Claim Submission

Recipient:	A12345678 SMITH, JANE	Service Provider:	123456 DOE, JANE A
Employment Accident:	N	Referring Provider ID:	
Auto Accident:	N	Prior Authorization Number:	
Other Accident:	N	Patient's Account Number:	123456789
Accident State:		Date of Illness/Injury/Pregnancy:	
Diagnosis Code 1:	1234	Hospitalization Date(s):	-
Diagnosis Code 2:		Billing Provider Tax ID:	899999999
Diagnosis Code 3:		Submission Reason:	Original
Diagnosis Code 4:		Original Reference Number:	
Service Provider NPI:		Billing Provider NPI:	
Referring Provider NPI:			

#### Service Lines

Line #	Dates of Service		Modifier Code		Diagnosis Code Pointer				Medicare				Charges	Days/Units	NDC	HCPCS	Place of	Emergency	ERSDT
	From	To	1	2	1	2	3	4	Paid	Deductible	Coinsurance	Other Insurance							
1	01/01/2007	01/01/2007			X				0.00	0.00	0.00	0.00	30.00						

Here the data entered can be verified. Changes can be made if necessary by clicking on

Edit Current Claim Enter New Claim

NOTE: Please use your browser to print this screen if you wish to maintain a copy. Be sure to set the print Orientation to Landscape.

**Note:**

Please read if you are going to print this page

To continue entering new claims click on

Enter New Claim

Done

start
Inbox - Microsof...
SESSION1 - EXT...
SESSION2 - EXT...
052458 denied cl...
https://azwebtst...
Document1 - Mic...
Internet
10:04 AM




AHCCCS Online - Microsoft Internet Explorer provided by AHCCCS


File Edit View Favorites Tools Help

Back Search Favorites

Address <https://azwebtst.statemedicaid.us/ClaimSubmission/Default.asp?Type=Professional> Go Links



# Arizona Health Care Cost Containment System



:: Main Menu :: FAQ :: LogOut ::

## Main Menu

- Eligibility and Enrollment Status
- Provider Information
- Claim Status
- Electronic Remittance Advice
- Prior Authorization Inquiry
- Newborn Notification
- Claim Submission**
- Provider Verification

## Account Information


User Name:	awescobedo
User ID:	0000020
Type:	Individual
IP:	170.68.241.113
AHCCCS Provider ID:	436198
User Account	

## Claim Submission

### Enter New Claim


Type of Claim: Professional Go...

### View Status

Date of Submission: 05/31/07  Go...

If a provider wants to see a list of all the claims entered on a specific date, just type that date here and click on

**Go**



Privacy Policy | Contact AHCCCS

AHCCCS, 801 E. Jefferson, Phoenix, AZ 85034, (602) 417-4000

Copyright 2003 AHCCCS, All Rights Reserved

start Inbox - Microsof... SESSION1 - EXT... SESSION2 - EXT... 052458 denied cl... AHCCCS Online - ... Document1 - Mic... 10:10 AM

https://azwebtst.statemedicaid.us/ClaimSubmission/ClaimSubmissionStatus.asp?SubmissionDate=06/1 - Microsoft Internet Explorer p

File Edit View Favorites Tools Help

Back Search Favorites

Address https://azwebtst.statemedicaid.us/ClaimSubmission/ClaimSubmissionStatus.asp?SubmissionDate=06%2F13%2F07&button2=Go... Go

Links AHCCCS - Public Website AHCCCS Public Website Arizona Government University Customize Links Free Hotmail State Of Arizona Weekly Job Announcements Windows

### Arizona Health Care Cost Containment System Online Claim Submissions

Claim Type	Submission Date/Time	Patient Account Number	Status	Processing Date/Time	CRN	Adjudication
Professional	6/13/2007 7:38:14 AM	DOEJ	In Progress	6/21/2007 12:56:33 PM		
Professional	6/13/2007 7:45:38 AM	DOEJ	In Progress	6/21/2007 12:56:33 PM		

Record Count: 2

< Previous

This screen will display a status log of all the claims entered via the web site on a specific date

Done Local intranet

start Inbox - Mic... SESSION1 ... 2 Window... Claims Subm... Document1 ... Microsoft Ex... https://azw... 2:12 PM